

22/03/2002

ASS. REC. BY:

REF:

CS3 / ASM18010762 / T2466

Special Instruction:

SUNVATOR

Smart claim

Tau Aich.

ASSIGNMENT (Office)

From (Person):

Vale Oh

of

ASM

Date/Time:

11062018 401pm

Estimated Cost:

Bill to:

OD / TP / WS / TP RES / OD RES / EVA / INV / MY / CS

To Inspect Vehicle No:

FBH 7642K

Insured:

SLN 1343m

at Workshop m/s

Universal Motors

Tel:

9642 3147

of

81k 1008 Bukit Merah Lane 3 #01-04

Policy No:

Claim No:

SBM00JNJ

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A

04062018

CA / REV / REP. / REV 24 HRS wpi

13062018

H.O.D. Endorsement:

Date/Time:

12062018 532pm

Person Contacted:

Michael

Vehicle IN / OUT

Date/Time	Action/Instruction (X) Estimate
	FBH 7642K - NBN / MSG18010409 / Y
	SLN 1343m - X
	Dismantle Part : 19.062018

DA: 04062018

Signature

Taufan

REF:

ASM (AXA)

ASSIGNMENT

From:

Date:

13/6/18

Estimated Cost:

OD ☒ WS / TP RES / OD RES / EVA / INV / MV

To inspect Vehicle No:

FBH 7642K

at Workshop m/s

Universal Motors

of Blk 1008, Blk Meruh Lane 3 #01-04

Insured:

Policy No.

Claims No.

Sum Insured:

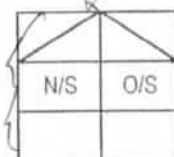
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.



Bal. or Market Value:

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.:

Yes or No

Lum Sum:

%

3 Val.:

Yes or No

CA / REV / REP. / 24 HRS ^{lup}

Vehicle: IN / OUT

Date:

Person Contacted:

Veh No:

FBH 7642K.

Yr Regn:

2013, Sep

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Bajaj Pulsar

C.C.

179

Colour

Black

A/C:

Insured / Std / NI / NA

Sp. Reading

46240.

T/Radio:

Insured / Std / NI / NA

Eng/No:

C/No:

MD2A12DZ1CG 29451

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / SRim / STD A/Rim or

Tyre Size:

F:

90/90R17

R:

120/80R17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

R4/10.

Front

Rear

R/Bal.

mm

R/Bal.

mm

L/Bal.

mm

L/Bal.

mm

D.O.A.

D.O.I.

13/6/18 @ 1845

Survey held at

Universal Motors

Des. of Damages: ☒ Frt / Rear / O/S / ☒ N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

21/6/18

Submit PRS report.

Date/Time: File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time: File Return to?

2)

Days Of Repair:

Resurvey No. of Trip:

Add Fee:

☐

: Site Insp (\$

☐

Interview (\$

☐

Tech. Insp (\$

☐

Weekend (\$

Survey Fee:

Transportation

) \$ + RS \$

) Photos

) Others

TOTAL

Report Format :

Lump Sum / I.B.I. (\$

100

100




Service Request Details

Claim

S8M00JNJ

Reference

None 

Loss Date

June 4, 2018

Request Date

June 11, 2018

Due Date

June 19, 2018

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Services

Pending verification - Direct Settlement

Actions

Next Step

Agree to perform service

Decline Work

Accept Work

Vehicle Information

Incident Vehicle Registration #

FBH7642K

Make

TPVD BAJAJ

- Model
 - PULSAR-180CC DTS-I (M)

Service Address

...

Primary Contact/Insured

HAROON ANWAR BIN
BLK 752 JURONG WEST ST 74, #04-24, 640752, Singapore
96659853

Claim Handler

OH Vale
6568804897
vale.oh@axa.com.sg
Additional Instructions

Messages	Invoices	History	Documents	Assessment	Metrics	Notes
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New Message

VEHICLE CLAIMS SPECIALIST PTE LTD
UEN 201802773H

Date: 12th June 2018

Your ref: SLN 1343M

BY EMAIL ONLY

Our ref: VCS/FBH 7642K/UM/PD

To: AXA INSURANCE (S) PTE LTD

Attn: Motor Claims Dept

Dear Sirs,

**CORRESPONDANCE PURSUANT TO PARAGRAPH 2.9 OF THE PRE-ACTION
PROTOCOL FOR NIMA CASES.**

We refer to your email dated 11th June 2018.

Please note that the said vehicle can be inspected at:

UNIVERSAL MOTORS PTE LTD
BLK 1008 BUKIT MERAH LANE 3
#01-04
SINGAPORE 159762

CONTACT NO: 96423147

Please call for to arrange for an appointment before conducting the pre-repair inspection.

Please note that the vehicle will be available for pre-repair inspection within the next 2 days excluding any intervening Saturday, Sunday and/or Public Holiday, the said workshop will commence repairs thereafter without further notice or reference to you. All our client's right are expressly reserved.

PLEASE REPLY BY EMAIL ONLY : VCSSG01@GMAIL.COM

DO NOT REPLY BY FAX

Yours faithfully

VCS
Vehicle Claims Specialist Pte Ltd

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	07/06/2018 16:18
Date Of Accident	04/06/2018 14:45
Exact Location Of Accident	ALONG PIE TOWARDS TUAS 36.2KM LANE 3 AND 4
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBH7642K
Insured/Policyholder	
Name Of Registered Owner	MOHAMED SATHIK FARLUDEEN
Passport No/FIN	G6315178K
Email Address	FARLU904@GMAIL.COM
Mobile Phone No	(LOCAL) +65-82651651
Alternative Phone No	OTHERS-82651651

Vehicle Particulars

Manufacturer	BAJAJ
Model	PULSAR-180CC DTS-I (M)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	
Cover Note Number	72033500

Driver

Name of Driver	MOHAMED SATHIK FARLUDEEN
Passport No/FIN	G6315178K
Date Of Birth	09/08/1986
Occupation	INDOOR
Date Of Driving Pass	11/02/2011
Driving Experience	7 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82651651
Fax Number	
Contact Number	OTHERS-82651651
Email Address	FARLU904@GMAIL.COM

Address	BLK 443D BUKIT BATOK WEST AVENUE 8 #11-773
Postcode	654443
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 21 BUKIT BATOK EAST AVE 4 , POSTCODE: 659840 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-6659999 - FAX NO: 66655793
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180604/2178

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLN1343M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ADILAH BINTI ANWAR
NRIC/Passport Number	S8909576Z
Contact Number	96308157
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

1

DETAILS OF INJURED PERSON 1

Name

MOHAMED SATHIK FARLUDEEN

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

FBH7642K

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

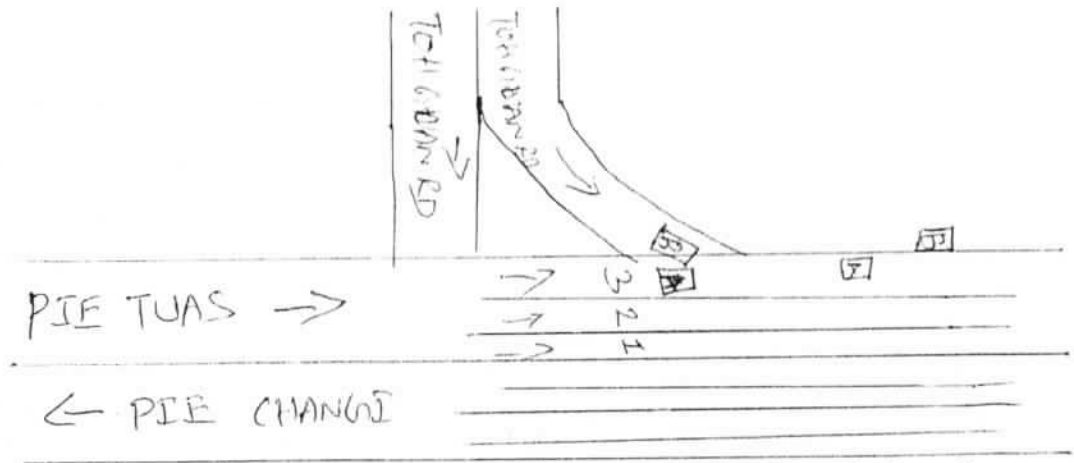
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

07/06/2018
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.

SKETCH PLAN



A) FBH 7642K
B) SW 1343 M

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


PLS REFER TO POLICE REPORT
T/20180604/2128

DECLARATION

I/We declare the foregoing particulars are true in every respect.


Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

 07/06/2018
Reporting Centre Personnel's Signature
Name: 
NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20180604/2178

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

1 of 3

Report No. T/20180604/2178

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/06/2018 19:35	Vide Report No.:	Station Diary No.: 189
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Informant's Particulars

Name of Informant: Mohamed Sathik Farludeen			Address: 443D Bukit Batok West Ave 8 #11-773 SINGAPORE 654443		
ID Type / ID No.: PASSPORT / N2046483			Contact No.: Home/Office: Mobile: 82651651		
Nationality: INDIAN			Email:		
Sex: Male	Age: 31	Date of Birth: 09/08/1986	Type of Informant: Rider		
Race: Indian			Language:		Institution / School Name:
Occupation: sales executive			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 04/06/2018 14:45	Type of Location:
Location: Along Road 1 PAN ISLAND EXPRESSWAY Along PIE towards Tuas 36.2km lane 3 and 4.				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH7642K	Motorcycle				Slightly Damaged	0
SLN1343M	Car				Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20180604/2178

2 of 3

Police Station Of Origin:

Bukit Batok N.P.C

21 Bukit Batok East Avenue 4 SINGAPORE

659840

Tel No: 1800-6659999

Report No. T/20180604/2178

CONTINUATION OF REPORT

Rider			
Name	Mohamed Sathik Farludeen	ID No.	N2046483
Related Vehicle	FBH7642K (Motorcycle)	Contact No.	82651651
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
Driver			
Name	Adilah binti Anwar	ID No.	S8909576Z
Related Vehicle	SLN1343M (Car)	Contact No.	96308157
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

V1) FBH7642K (Motorcycle)

V2) SLN1343M (Car)

On 04/06/2018 at around 1445hrs, I was riding V1 along PIE towards Tuas at the third lane. Subsequently, V2 was on my left, and wanted to merge into my lane. I did not see V2 on my left and I continued to accelerate. Subsequently out of nowhere, V2 made a sharp right turn and hit against my left side. I lost balance and fell off my bike. V2 subsequently stopped ahead and a passerby called for ambulance. Subsequently ambulance and traffic police arrived at scene. I sustained some injuries. The injuries are as follows, my left elbow sustained some abrasions. My left toe nail is broken. There are some abrasions on my knees and there is also some redness on my neck area. I was not conveyed as I did not feel any pain earlier.

My vehicle also sustained some damages. V1 headlight sustained some scratches and the gear was damaged. The rear box was broken and the left signal was also damaged. My left side mirror was broken. My bike was unable to start and was towed to my residential address. I have not went to the clinic to make a check. I do not have any in built camera.



**SINGAPORE
POLICE FORCE**



T/20180604/2178

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

3 of 3

Report No. T/20 180604/2178

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

J /

Sgt 2 MUHAMMAD SYAFIQ BIN MOHD RAFAEL

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sr. Staff Sgt YUS MASTARI I KHAZALI N 114

Contact No: 65476214

Authentication Stamp

NP168

Signature:

Singapore Police Force

Signature Of Informant:

Date/Time:


04/06/2018 19:35

Classification Of Case:

S PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer:
MODERNWOOD PTE. LTD.

Sector: **CONSTRUCTION**



Name: **MOHAMED SATHIK FARLUDEEN**


Occupation: **SALES COORDINATOR**

S Pass No.: **0 34902832**

Date of Application: **21-12-2016**

Date of Issue: **22-02-2017**

Date of Expiry: **22-02-2019**





L7071702

REPUBLIC OF SINGAPORE DRIVING LICENCE



Vehicle Number: **G 63 15178 K**

MOHAMED SATHIK FARLUDEEN

Birth Date: **09 Aug 1986**

Issue Date: **28 Jan 2016**

Valid Till: **10-02-2021**





002523116J

VISIT PASS
Immigration Regulations

Name: **MOHAMED SATHIK FARLUDEEN**



Date of Birth: **09-08-1986** Sex: **M** Nationality: **INDIAN**

Pin: **G6315178K** Date of Issue: **22-02-2017** Date of Expiry: **22-02-2019**

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED. OR WHEN A NEW CARD IS ISSUED TO YOU



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

		EFFECTIVE DATE
C	Motorcycles up to 200 CC	11 Feb 2017
C1	Motor cars up to 3500 kg with up to 9 passengers, excluding of the driver, and motor tractors/trailers up to 3500 kg	11 Feb 2017
C2		

S / No 9000269313

G6315178K

NF 428A

License No: G6315178K

